

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type:: Regular
Subject Matter:: Utility
CD-ROM or CD-R?: None
Number of CD disks::
Number of copies of CDs::
Sequence submission?: None
Computer Readable Form (CRF)?:
Number of copies of CRF::
Title:: Non-Nucleoside Reverse Transcriptase Inhibitors
Attorney Docket Number:: 1718-0220PUS1
Request for Early Publication?: No
Request for Non-Publication?: No
Suggested Drawing Figure::
Total Drawing Sheets::
Small Entity?: No
Petition Included?: No
Petition Type::

APPLICANT INFORMATION

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: Dmitry
Middle Name::
Family Name:: ANTONOV
City of Residence::
State or Province of Residence::

Country of Residence::
Street of mailing address:: c/o Medivir AB
Lunastigen 7
City of mailing address:: Huddinge
State or Province of mailing address::
Country of mailing address:: SWEDEN
Postal or Zip Code of mailing address:: S-141 44

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: Christian
Middle Name::
Family Name:: SUND
City of Residence::
State or Province of Residence::
Country of Residence::
Street of mailing address:: c/o Medivir AB
Lunastigen 7
City of mailing address:: Huddinge
State or Province of mailing address::
Country of mailing address:: SWEDEN
Postal or Zip Code of mailing address:: S-141 44

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: Stefan
Middle Name::
Family Name:: LINDSTROM
City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address:: c/o Medivir AB
Lunastigen 7

City of mailing address:: Huddinge

State or Province of mailing address::

Country of mailing address:: SWEDEN

Postal or Zip Code of mailing address:: S-141 44

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Full Capacity

Given Name:: Christer

Middle Name::

Family Name:: SAHLBERG

City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address:: c/o Medivir AB
Lunastigen 7

City of mailing address:: Huddinge

State or Province of mailing address::

Country of mailing address:: SWEDEN

Postal or Zip Code of mailing address:: S-141 44

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 02292

REPRESENTATIVE INFORMATION

Representative Customer Number::	02292
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DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/EP2003/009872	09/05/03

FOREIGN PRIORITY INFORMATION

Country::	Application Number::	Filing Date::	Priority Claimed::
EP	02019997.2	09/05/02	Yes

ASSIGNEE INFORMATION

Assignee Name:: Medivir AB

Street of mailing address:: Lunastigen 7

City of mailing address:: Huddinge

State or Province of mailing address::

Country of mailing address:: SWEDEN

Postal or Zip Code of mailing address:: S-141 44